

## OUTPATIENT REHAB AGENCY REIMBURSEMENT

Effective July 1, 2018, Outpatient Rehabilitation Agencies will be reimbursed based on the DMAS agency fee schedule listed below:

<b>Revenue Code prior to and on June 30, 2009</b>	<b>Procedure Code effective on and after July 1, 2009</b>	<b>Procedure Code Description</b>	<b>DMAS Fee Schedule Amount effective July 1, 2018*</b>
0421	97110	Therapeutic procedure (PT), each 15 min. <b>Note:</b> unit = 15 minutes	\$27.03
0423	97150	Therapeutic procedure(s) (PT), group <b>Note:</b> unit = a group session	\$17.14
0424	97163	Physical therapy evaluation high complexity, 45 minutes <b>Note:</b> unit = an evaluation	\$68.92
0431	97530	Therapeutic activities (OT), each 15 min <b>Note:</b> unit = 15 minutes	\$28.56
0433	S9129	Therapeutic procedure(s) (OT), group <b>Note:</b> unit = a group session	\$17.14
0434	97167	Occupational therapy evaluation high complexity, 45 minutes <b>Note:</b> unit = an evaluation	\$73.85
0441	92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual <b>Note:</b> unit = one treatment session	\$62.82
0443	92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group (2 or more individuals) <b>Note:</b> unit = one treatment session	\$29.32
0444	92521- 92524	Evaluation of speech, language, voice, communication, and/or auditory processing <b>Note:</b> unit = an evaluation	\$146.20

\* Rates have been calculated with an inflation adjustment of 3.10% in accordance with legislation approved by the General Assembly.